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Bib Data Sheet

CONFIRMATION NO. 1968

SERIAL NUMBER 09/663,002	FILING DATE 09/15/2000 RULE	CLASS	GROUP ART UNIT 2645	ATTORNEY DOCKET NO. 10508.18
APPLICANTS Huan-Yu Su, San Clemente, CA; Yang Gao, Mission Viejo, CA;				
** CONTINUING DATA ***** THIS APPLICATION IS A CIP OF 09/154,660 09/18/1998 WHICH CLAIMS BENEFIT OF 60/097,569 08/24/1998				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 11/15/2000				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged		STATE OR COUNTRY CA	SHEETS DRAWING 7	TOTAL CLAIMS 20
Examiner's Signature _____ Initials _____		INDEPENDENT CLAIMS 3		
ADDRESS 757				
TITLE System for speech encoding having an adaptive encoding arrangement				
FILING FEE RECEIVED 690	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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SERIAL NUMBER 09/663,002	FILING DATE 09/15/2000 RULE -	CLASS 704	GROUP ART UNIT 2641	ATTORNEY DOCKET NO. 10508.18
APPLICANTS Huan-Yu Su, San Clemente, CA ; Yang Gao, Mission Viejo, CA ;				
** CONTINUING DATA ***** THIS APPLICATION IS A CIP OF 09/154,660 09/18/1998 WHICH CLAIMS BENEFIT OF 60/097,569 08/24/1998 <i>Re + 633US33</i>				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 11/15/2000				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met <i>Allowance</i> Verified and Acknowledged <i>MW</i> Examiner's Signature Initials		STATE OR COUNTRY CA	SHEETS DRAWING 7	TOTAL CLAIMS 20
INDEPENDENT CLAIMS 3				
ADDRESS Darin E Bartholomew Brinks Hofer Gilson & Lione PO Box 10395 Chicago ,IL 60610				
TITLE System for speech encoding having an adaptive encoding arrangement				
FILING FEE RECEIVED 690	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	